

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>RM</i>	<i>67814</i>	<i>5/25/00</i>
O.I.P.E. CLASSIFIER	<i>ELAN</i>	<i>21</i>	<i>5/11/00</i>
FORMALITY REVIEW	<i>NH</i>	<i>617</i>	<i>7-14-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral) ... Canceled A Appeal
÷ Restricted O Objected

Best Available Copy

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
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50	✓

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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